Approved for use through 7/31/2006 (08-0-3)

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PATENT APPLICATION FEE DETERMINATION

Substitute for Form P.TO-875				Application or Docker Number
CLAIMS AS FILED - PART I				10-0436
	(Column 1)	(Column 2)	SMALL ENTITY	OTHER THAN
BASIC FEE	NUMBER FILED	NUMBER EXTRA		SMALL ENTITY
(37 CFR 1.15(a)) TOTAL CLAIMS (37 CFR 1.16(c))			3	RATE FEE
INDEPENDENT CLAIMS	minus 20 =	·	X 3 =	OR I I
MULTIPLE DESCRIPTION OF THE PROPERTY OF THE PR		X 5 =	OR XS =	
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.15(d))			TOTAL E	DR +,360=
2-23-06 100mm	un 1) (Con	ımn 2) (Column 3)	ADD'S CCC	OR ADD'L FEE
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G7 CFR 1,16(b))	Minus	+=	$x_1 = \frac{25}{25} = 0R$	x:50=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.15(d))				
* If the enterior				+ 360 TOTAL
If the 'Highest Number Previous If the 'Highest Number Previous If the 'Highest Number Previous	than the entry in column 2: visty Paid For IN THIS SPACE	vrite "0" In column 3, E is less than 20, enter	OR OR	ADD'L FEE

"If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter '20'
"If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter '20'
The 'Highest Number Previously Paid For' (Total or Independent) is the thighest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the Induding pathering, preparing, and submitting the complete application form to the USPTO. This will vary depending upon the individual case, Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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